

## PART B - FEE(S) TRANSMITTAL



Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571) 273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks I through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by the specific and new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for

indicated unless corrected below or directed otherwise in Block naintenance fee notifications.	1, by (	a specifying a no	:w (	correspondence address;	and/or (b) indic	ating a separate	; "F.
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of	address)	<b>4</b> 83	$\sum_{i}$	Note: A certificate of			

37485

7590

01/23/2006

SWANSON & BRATSCHUN, L.L.C 1745 SHEA CENTER DRIVE, SUITE 330 HIGHLANDS RANCH, CO 80129

04/28/2006 STEUMEL2 00000037 10718982

01 FC:2501 02 FC:1504 700.00 OP 300.00 OP ree(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

1 hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

		(		
(Depositor's name)	$\Delta$	Doucet/	onica	Ver
(Signature)	oreal	ca d	Marie	711
(Date)		2006	il 24,	Apr

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/718,982	11/20/2003	Ron L. Hale	00067.01R	2735

TITLE OF INVENTION: DRUG CONDENSATION AEROSOLS AND KITS

APPLN. TYPE	SMALL ENTITY	ISSUE FE	Ē	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700		\$300	\$1000	04/24/2006
EXAM	MINER	ART UNIT	г	CLASS-SUBCLASS		
HAGHIGHA	ATIAN, MINA	1616		424-045000		
CFR 1.363).  Change of correspon Address form PTO/SB/1  "Fee Address" indica PTO/SB/47; Rev 03-02 Number is required.	dence address or indication of "F dence address (or Change of 22) attached. ation (or "Fee Address" Indicator more recent) attached. Us D RESIDENCE DATA TO E	Correspondence ation form e of a Customer	(1) the na or agents (2) the na registered 2 registered listed, no	nting on the patent front page, limes of up to 3 registered pater OR, alternatively, me of a single firm (having as a attorney or agent) and the named patent attorneys or agents. If name will be printed.  T (print or type)	nt attorneys 1 Swan	son & Bratschun L iam L. Leschensky
PLEASE NOTE: Unles recordation as set forth i	_			pear on the patent. If an assign for filing an assignment. CE: (CITY and STATE OR CO		document has been filed for
	rmaceuticals, I			Palo Alto, CA		· . □ a
4a. The following fee(s) are		`	Payment of	1. "Name of the last of the la	orporation or other private gi	roup entity Government
Issue Fee	enciosed:		•	in the amount of the fee(s) is en	alarad	
_	small entity discount permitte			by credit card. Form PTO-2038		
•	of Copies	ĺ	The Dir	ector is hereby authorized by count Number 19-5117	harge the required fec(s), or	credit any overpayment, to copy of this form).
5. Change in Entity Status	s (from status indicated above	e)				<u> </u>
🛭 a. Applicant claims S	SMALL ENTITY status. See	37 CFR 1.27.	🗖 b. Applic	cant is no longer claiming SMA	LL ENTITY status. See 37 (	CFR 1.27(g)(2).
The Director of the USPTO NOTE: The Issue Fee and I interest as shown by the rec	is requested to apply the Iss Publication Fee (if required) vords of the United States Pat	ue Fee and Publication will not be accepted tent and Trademark C	on Fee (if a from anyon Office.	ny) or to re-apply any previousle other than the applicant; a regi	y paid issue fee to the applic istered attorney or agent; or t	ation identified above. the assignee or other party in
Authorized Signature	X Mh	The	L,	Date	4/24/06	
Typed or printed name _	Katherine Lob	el-Rice		_ Registration	No. 58,07	9

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.